

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

**IN RE:**  
**ERVIN FRANK LAYER**  
**DEBTOR**

**CASE NO: 17-32670-HDH-13**

**REPORT OF (ADJOURNED) SECTION 341 MEETING**

<b>General Case Information</b>																
<b>Case Information:</b>	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;"><u><b>Hearing Information:</b></u></td> <td style="text-align: center;"><u><b>Payment Information:</b></u></td> </tr> <tr> <td>341 Meeting Date: Aug 17, 2017</td> <td>Plan Base Amount: \$135,726.00</td> </tr> <tr> <td>Days from Petition: 42 days</td> <td>Plan Term: 60 months</td> </tr> <tr> <td>Original 341 scheduled: Aug 17, 2017</td> <td>Current Monthly Payment: \$2,191.00</td> </tr> <tr> <td>Confirmation Hearing set: Sep 28, 2017</td> <td>First Payment Due: Aug 06, 2017</td> </tr> <tr> <td>No Show/ID NOI Sent:</td> <td>Amount Paid to Trustee: \$2,191.00</td> </tr> <tr> <td>NOI for 1st Pymt Sent:</td> <td></td> </tr> </table>	<u><b>Hearing Information:</b></u>	<u><b>Payment Information:</b></u>	341 Meeting Date: Aug 17, 2017	Plan Base Amount: \$135,726.00	Days from Petition: 42 days	Plan Term: 60 months	Original 341 scheduled: Aug 17, 2017	Current Monthly Payment: \$2,191.00	Confirmation Hearing set: Sep 28, 2017	First Payment Due: Aug 06, 2017	No Show/ID NOI Sent:	Amount Paid to Trustee: \$2,191.00	NOI for 1st Pymt Sent:		
<u><b>Hearing Information:</b></u>	<u><b>Payment Information:</b></u>															
341 Meeting Date: Aug 17, 2017	Plan Base Amount: \$135,726.00															
Days from Petition: 42 days	Plan Term: 60 months															
Original 341 scheduled: Aug 17, 2017	Current Monthly Payment: \$2,191.00															
Confirmation Hearing set: Sep 28, 2017	First Payment Due: Aug 06, 2017															
No Show/ID NOI Sent:	Amount Paid to Trustee: \$2,191.00															
NOI for 1st Pymt Sent:																
<b>Meeting Information:</b>	<p>Debtor(s) Appeared? Dr 1 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Dr 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Debtor(s) <input checked="" type="checkbox"/> Attorney / <input type="checkbox"/> Paralegal Appeared? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pro Se</p> <p>Creditor Appeared? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><u>Name:</u> _____ <u>Representing:</u> _____</p> <p>Is this a Business Case? <input type="checkbox"/> Yes Level: <input type="checkbox"/> No</p> <p>ID Checked: <input checked="" type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</p> <p>SSN Checked: <input checked="" type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</p> <p>Returned Tax Returns to Debtor: <input type="checkbox"/></p>															
<b>Hearing Status:</b>	<p>341 Meeting Concluded: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Adjourn to: to be heard by:</p> <p>Reason for adjournment:</p> <p>Debtor was asked the standard questions: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>															
<b>Notice of Intent to Dismiss Information:</b>	<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Failure to Appear:</td> <td><input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td> <td><input type="checkbox"/> Photo ID: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td> </tr> <tr> <td><input type="checkbox"/> Wage Directive Info:</td> <td><input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td> <td><input type="checkbox"/> SSN Card: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td> </tr> <tr> <td><input type="checkbox"/> Tax Returns:</td> <td><input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td> <td><input type="checkbox"/> Paystubs: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2</td> </tr> <tr> <td colspan="3">DSO Information:</td> </tr> <tr> <td colspan="3">Other:</td> </tr> </table>	<input type="checkbox"/> Failure to Appear:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Photo ID: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Wage Directive Info:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> SSN Card: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Tax Returns:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Paystubs: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	DSO Information:			Other:		
<input type="checkbox"/> Failure to Appear:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Photo ID: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2														
<input type="checkbox"/> Wage Directive Info:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> SSN Card: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2														
<input type="checkbox"/> Tax Returns:	<input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2	<input type="checkbox"/> Paystubs: <input type="checkbox"/> Dr 1 <input type="checkbox"/> Dr 2														
DSO Information:																
Other:																
<b>Legal Action Needed:</b>	<p>Trustee's Motion to Transfer Venue Needed:</p> <p>Trustee's Objection to Exemptions needed for: unknown amount of mort fraud claim</p> <p><input type="checkbox"/> Other: (Comments Below)</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Debtor confirmed that all the information contained on the Petition, Schedules, Statement of Financial Affairs, and CMI form was true and correct and needed no changes or additions to make them true and complete.</p>															
<b>Confirmation Issues</b>																
<b>Best Interest:</b>	<p>Exemptions: <input type="checkbox"/> Federal: <input checked="" type="checkbox"/> State - Texas <input type="checkbox"/> State - Other:</p>															

**REPORT OF (ADJOURNED) SECTION 341 MEETING, Page 2****Case # 17-32670-HDH-13****ERVIN FRANK LAYER**

	<p>Exceeds \$160,375.00 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n/a</p> <p>Value (equity) of non-exempt property (provide detail below): \$4421.86 accounts rec</p> <p>Total Value of Assets listed as Exempt on Schedule C: \$307,773.20</p> <p>Improper Exemption: <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:</p> <p>Fraudulent Transfer: <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:</p> <p><input checked="" type="checkbox"/> Objection to Confirmation needed for the following reason:</p> <p>2012 tahoe is really 2002; both paid off unknown amount amount for mort fraud against Bayview and Citi--thad was hired in prior case, no adversary filed need tobj best interest/account recievable were not listed on schedules or exempted</p>
Disposable Income:	<p><b>Below Median Income</b></p> <p>Debtor's Projected Monthly Disposable Income: \$2291 x ACP: 36 = \$82,476</p> <p>Comment:</p> <p><b>Above Median Income</b></p> <p>Debtor's Monthly Disposable Income: \$ x ACP: 60 = Unsecured Creditor Pool: \$</p> <p>Line Notes:</p> <p>Line Notes:</p> <p>Line Notes:</p> <p>Line Notes:</p> <p>Line Notes:</p> <p><input checked="" type="checkbox"/> Objection to Confirmation needed for the following reason:</p> <p><b>**SECTION D1 (BAYVIEW)-DATE ARR THROUGH SHOULD BE 7/1; SECTION D1 (THE 2ND BAYVIEW LISTED) IS IN WRONG SECTION SHOULD BE IN SECTION D3 &amp; AMOUNT DO NOT MATCH S/B \$2576.00; SECTION D2 (BAYVIEW) PAYMENT AMOUNT &amp; APD AMOUNTS DO NOT MATCH. ***</b></p>
Feasibility	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Explain:</p> <p><input type="checkbox"/> Objection to Confirmation needed for the following reason:</p> <p>pp \$2270 2 adults/2 children was working under prior case/now getting new cases/office sharing, no rent expense at this time/first rent, share space but no rent pet exp double dipped \$215; but food low</p>
Good Faith: (Petition & Plan)	<p><input type="checkbox"/> Yes <input type="checkbox"/> No Explain:</p> <p><input type="checkbox"/> Objection to Confirmation needed for the following reason:</p>
Domestic Support Obligation (DSO):	<p>Is Debtor current on Post Petition DSO? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p> <p>Comment:</p> <p><input type="checkbox"/> Objection to Confirmation needed for the following reason:</p>
Tax Returns:	<p>Filed previous 4 years: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Specify:</p> <p>Number of Exemptions on last year: Notes:</p> <p>Number in Household per CMI: Notes:</p> <p><input type="checkbox"/> Objection to Confirmation needed for the following reason:</p>
Business Case:	<p><input checked="" type="checkbox"/> Self-Employed Type of Business: family lawyer</p> <p><input type="checkbox"/> Incurs Trade Debt <input type="checkbox"/> Liquor License <input type="checkbox"/> Employees <input type="checkbox"/> Over \$15,000 per/mo.</p> <p><input type="checkbox"/> Refer to Business Case Analyst</p>

**REPORT OF (ADJOURNED) SECTION 341 MEETING, Page 3****Case # 17-32670-HDH-13****ERVIN FRANK LAYER**

Civil Enforcement:	<input type="checkbox"/> Petition Preparer was involved <input type="checkbox"/> Debtor attorney fees exceed "Standard fee" Comment: <input type="checkbox"/> Objection to Confirmation needed for the following reason:	
521(a)(1) Information has been filed:	<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> List of Creditors  <input checked="" type="checkbox"/> CMI Statement  <input checked="" type="checkbox"/> Schedules A,B,C,D,E,F,G and H  <input checked="" type="checkbox"/> Schedules I and J         </div> <div> <input checked="" type="checkbox"/> Statement of Financial Affairs  <input checked="" type="checkbox"/> 342(b) Certificate by Dr Atty  <input checked="" type="checkbox"/> Dr 1 60 Days Payment Advices  <input type="checkbox"/> Dr 2 60 Days Payment Advices         </div> </div>	
Eligibility:	Certificate of Credit Counseling within 180 days on file <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Provider of Credit Counseling is approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Debt limits exceed maximum (S-\$1,184,200 U-\$394,725) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Required for Confirmation	Documents Required for Confirmation: need amended plan; see above /best interest/2015 and 2016 tax returns not in system Other Possible reasons for Objection to Confirmation: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Does not pay priority claims in plan  <input type="checkbox"/> Discriminates between creditors of the same class  <input type="checkbox"/> Additional plan provisions (<b>Section M</b>)         </div> <div>           Note:            Note:            Note:         </div> </div>	
Presiding Officer Notes:	behind on first and second lien? student loans? he got out of law school in 2014; almost all debt is student loan debt; he testified some of them are duplicate; (Not \$200k)	
Presiding Officer Information:	The 341 meeting was heard on: 8/17/2017    By: /s/ Tara Tankersley <div style="text-align: right;">Office of the Standing Chapter 13 Trustee</div>	